PART B - FEE (S) TRANSMITTAL

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APPLICATION NO.		FILING DATE		FIRST NAMED INVI			ENTOR ATTO		RNEY DOCKET NO.			CONFIRMATION NO.	
10/572,876 03		03/22/20	/22/2006		Junpei TSUJI		Q937		Q93781	781.		3669	
TITLE OF INVENTIO	N: METHO	D FOR PR	ODUCING PI	ROPLE	NEOXIDE								
APPLN. TYPE	SMAL ENTIT		ISSUE FEE		PUBLICATI FEE	ION	PREV. F	PAID ISSUE FI	EE	TOTAL FEE(S		S) DATE DUE	
nonprovisional	NO \$14		\$1440.00		\$300.00		\$0.00			\$1,740.00		05/01/20	08
EXAMINER					ART UNI	T	CLASS-SUBCLASS		7				
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1. Change of correspon	dence addres	s or indicat	ion of "Fee Ad	dress" (37 CFR 1.363	2. For	printing o	on the patent fro	ont page	list	1 Su	ghrue Mion, PLL	.C
\Box Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.								of up to 3 rents OR, alterna		patent	2	· · ·	
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) ATTACHED. Use of a Customer Number is required.							(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be						
3. ASSIGNEE NAME	AND RESID	DENCE DA	TA TO BE PE	INTE	ON THE PAT	printed ENT (pr		ne)					
PLEASE NOTE: Unle recordation as set forth	ss an assigne	e is identifi	ied below, no	assigne	e data will appe	ar on th	e patent.	If an assignee i	s identif	ied below,	the doc	ument has been f	iled for
(A) NAME OF ASSIG	NEE			(B) RI	ESIDENCE: (CI	ITY and	STATE (OR COUNTRY	7)				
SUMITOMO CHEMIO	CAL COMPA	ANY, LIMI	TED	T	okyo, Japan								
Please check the appro	priate assigne	ee category	or categories (will no	t be printed on the	he paten	t): 🗖 Indi	ividual ☑ Corp	oration o	r other pri	vate gro	up entity □ Gove	ernment
4a. The following fee(s) are submitted:					4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)								
☑ Issue Fee					☐ A check is enclosed.								
☑ Publication Fee (No	☐ Payment by credit card. Form 1310-2038 is attached.												
☐ Advance Order - # o	☑ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-4880 (enclose an extra copy of this form).												
								and authorized any overpayme				to Deposit Accort.	unt No.
5. Change in Entity Sta	,		•				•	•					
a. Applicant claims					• • • • • • • • • • • • • • • • • • • •							CFR 1.27(g)(2).	
The Director of the US	-		-										
NOTE: The Issue Fee a party in interest as sho	and Publication	on Fee (if roords of the	equired) will n United States	ot be ac Patent a	and Trademark (yone oth Office.	er than th	ne applicant; a i	egistered	l attorney	or agent	; or the assignee of	or other
Authorized Signature		John	m Calla	h		Date				April 1	7, 2008		
Typed or Printed Name	e	John	n T. Callahan			Regist	ration No			32,607		1000000 4044	
Modified PTOL-85 (Re	ev 08/07) Ar	proved for	use through 0	8/31/20	10				4/18/26	NOMB 80	1H1-5 06	<u>1900063 194880</u>	10572
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